FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00



Sandra B. Mortham

DOCUMENT # P96000103597 (6)

Principal	Place of	Business
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FILED Apr 23 1997 8:00am Secretary of State



FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00					FILED		
COR ANNU	PROFIT PORATION JAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 23 1997 8:00am Secretary of State		
	RAVEL INC.	Ma 625	8597 (6) Start So dixie Highway Ste E Worth FL 33460-4977	В			
					3. Date Incorporated or Qualified	3a. Date of Last R	eport
9 Princinal Pi	lace of Business	20	Mailing Address		12/26/1996 4. FEI Number	1 145	pplied For
21	75.50 D1		Jan	P	4. TETROTIDE		t Applicable
Suite, Apt.		27	Suite, Apt. #, etc.	\	5. Certificate of Status Desired	\$8.75	Additional
City & State	te Work		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00	
2ip 27 4	Cour 25		Zip	Country	8. This corporation has liability for i		
		ress of Current Regis			10. Name and Address of New Re		
	RDAN, RAYMOND			81 Name	Solf		
	SO DIXIE HIGHWAY			82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
LANE	WORTH FL 33460	,		83			
 				84 City		051 7%	Code
1							Code
	to the provisions of Se egistered agent, or bo m familial with, and a	ections 607.0502 and 60 oth, in the State of Floric scept the obligations of	07.1508, Florida Statutes la Such change was au Section 607.0578, Flori	 the above-named co thorized by the corpor da Statutes. 	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing it the appointment as 8/20/9 7	s registered registered
	Signatury typed or print date	time of legita red agent and title		Registered Agent signature req		DAIE TO L	
12.	<u>n</u> //	OFFICERS AND DIREC	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR Change	IS IN 12 Addition
NAME	JOURDAN, RAYMO	OND	C) beceiv	1.2 NAME		Onange	AUGINON
STREET ADDRESS	625 SO DIXIE HIG			1.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL	33460		1.4 CITY-ST-ZIP			Addition
TITLE			☐ DELĒ1E	2.1 THILE		☐ Change	Addition
NAME				2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS City-St-Zip				2 4 City - S1 - ZiP			
TITLE			DELETE	3.1 TITLE		Change	Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP			DELETE	3.4. C(1Y - ST - 7)P 4.1 TITLE		☐ Change	Addition
TITLE NAME			C) Office	4. 2 NAME		Onlings	Padolion
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY - S1 - ZIP			
TITLE			DELETE	5.1 Trī LE		Change	Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE			DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			- 1
STREET ADDRESS				6.3 STREET ADDRESS			į
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 I changed, or on an attachment with an address 2/21/07 al rockers